December 2008 Issue 3

Rural & Frontier Health Division Update

Division Staff

Ron Pearson
Administrator
Michelle Hoffman
Executive Assistant
Jamie Raff
Financial Manager

Office of Rural Health

Sharla Allen, Manager Jeff Hopkins Work-force Specialist Keri Wagner Admin Assistant

Community Services

Jim Rolf, Manager Tricia Dean Program Specialist Angela Pierce Benefits Specialist

Multicultural Fealth

Betty Sones, Manager Laura Ward Project Manager

Telehealth/Telemed

Betty Sones

Vital Statistics Svcs

Gladvs Breeden Field Representative Records Unit Supv Bernice Cox Adoption Records Carol Gass Nosologist Christine Williams Admin Assistant Deborah Gentry Corrections Specialist Verna Plumlee Fiscal Specialist Aubrie Adams Records Specialist Emily Soloman Records Specialist

Rural and Frontier Health Division (307) 777-8902 http://www.health.wyo.gov/rfhd

Welcome to the third issue of the "Rural and Frontier Health Division Update!" This newsletter is provided as an informational source on activities involving the programs and services within the division. Comments and/or suggestions are welcomed and may be addressed to WDH-RFHD@health.wyo.gov.

<u>HRSA Office of Performance Review Grantee Performance Review Schedule for</u> 2009:

HRSA's Office of Performance Review (OPR) intends to conduct Strategic Partnership Sessions with HRSA grantees from 11 states. The 11 States selected for CY 2009 are: Maine; New York; Pennsylvania; Florida; Alabama; Michigan; Louisiana; Missouri; Wyoming; California; and Alaska. In addition, OPR intends to conduct 9 community Strategic Partnership Sessions. OPR is in the process of identifying the 9 communities. The purpose of these Strategic Partnership Sessions is to improve the overall health of populations living within communities and States. Through structured partnership sessions, OPR will convene HRSA grantees from selected States/communities, HRSA project officers and other stakeholders to review key population-level indicators of health, analyze the factors impacting these indicators, and identify effective, collaborative strategies to improve the overall health of populations living within these States and communities. A copy of the Strategic Partnership Protocol is available on the HRSA website: http://www.hrsa.gov/performancereview.

Wyoming Health Professions Database:

This is a healthcare workforce information system which began as a project of the Wyoming Healthcare Commission (WHCC). The database contains county-specific profiles of the state's healthcare workforce and facilities, and has a wide range of potential uses:

- Monitor federal and state programs implemented to aid recruitment and retention efforts
- Make decisions regarding workforce, educational, and strategic planning
- Monitor healthcare trends in areas such as workforce movement, service delivery, and patient activity
- Identify new recruitment and retention strategies
- Provide accurate shortage area designations
- Provide reliable information for grant applications
- Improve the coordination of services for proper referrals
- Bolster the capacity to rapidly retrieve critical information for emergency preparedness efforts

 Produce geographic information system products for mapping workforce distribution and trends.

The University of Wyoming Survey and Analysis Center and the WDH's Rural and Frontier Health Division are partnering and planning to continue this valuable database beyond the Wyoming Healthcare Commission's sunset in June 2009.

Outreach Grant Programs:

While they are now completed, 30 Outreach Grant Programs in 20 states that ran from 2005-2008, now serve as a valuable resource for those interested in learning about the Outreach grant program and the impact they can have on rural health care. They also represent great models for replication. If you have any specific questions about these completed grants or the Outreach grant program in general, please contact Nisha Patel (npatel@hrsa.gov), the Outreach Program Coordinator. The Sourcebook can also be viewed at - http://www.raconline.org/pdf/vol13sourcebook.pdf

<u>Vital Statistics Services Staff is currently in support of three outside studies for which</u> death data is being provided:

- The National Longitudinal Mortality Study performed by the Data Integration Division of the National Census Bureau in Indiana
 - Events cover the years 1979 to 2002 and involve 111 deaths
 - Outcome is to report the causes of death in relation to demographic and socioeconomic variables
- The Division of Reproductive Health of CDC's "Pregnancy Mortality Surveillance" for the epidemiologic study of maternal deaths
 - Concerns deaths of all women who died within one year of pregnancy from any causes and information about the pregnancy and birth prior to the mother's death
 - Outcome desired is to reduce pregnancy-related death as a result of information derived from studies
- Office of Healthcare Financing/EqualityCare for the Wyoming Department of Health
 - Assists by providing data to complete a Mortality Review for Medicaid
 - Subject: Developmental Disability clients on Medicaid Waivers that died during the year 2007
 - Data to be included with information recorded in medical records that were submitted to Medicaid as a part of their Mortality Review of deceased clients

The Electronic Divorce System:

Historically, the divorce report was completed manually by County Court clerks.
 Vital Statistics Services (VSS) only supplied the forms that were filled out to report divorces.

"Stacks of paper copies will no longer be sent to VSS of records created in county offices.
Essentially, the system will be paperless"

- To automate the process of preparing divorce reports, the individual counties had invested their time and resources and developed their own software to generate the divorce reports sent to VSS. When received by VSS, information recorded on the divorce reports were keyed into the database for statistical purposes and for indexing of records.
- Development and distribution of the Electronic Divorce System by VSS to all counties has created a universal platform that is consistent throughout the State of Wyoming.
- VSS will be able to increase data accuracy through use of edits designed within the system. A series of checks will run to ensure all required fields are completed.
- In the past, the counties would wait once a month to send a divorce record, now they
 are able to complete the record and submit it once it's completed. Stacks of paper
 copies will no longer be sent to VSS of the records created in the county offices.
 Essentially, the system will be paperless.
- The use of the electronic signature by offices submitting divorce reports has made the system a success.

Multicultural Health Advisory Committee (MHAC):

This committee along with its three sub-committees met November 6-7 in Cheyenne. The purpose of this committee is: 1) inform MHAC on activities, goals, and objectives for special projects completed; 2) seek collaboration on future projects; and 3) brainstorm for strategy on enhancing outreach and education.

The projects planned for the upcoming year are: 1) fund Connect Wyoming for a resource database development that links to the Wyoming Office of Multicultural Health website; 2) hold two conferences on Trauma and Preventative and Chronic Disease related topics in 2009.

CMS Announces Final Rule for Telehealth Reimbursement for 2009:

The U.S. Centers for Medicare and Medicaid Management (CMS) just released its final rule under the annual physician fee schedule policies for 2009. In the rule, CMS largely affirmed decisions described in the preliminary announcement earlier this year.

However, in response to a request and inquiry from the American Telemedicine Association, the agency announced that it will start reimbursing approved telehealth services for skilled nursing facilities starting in 2009. Further, although no immediate approval was given, CMS agreed to evaluate the use of a number of additional codes related to skilled nursing facilities in its review for 2010. ATA outlined these codes in our request as: initial nursing facility care (as described by HCPCS codes 99304 through 99306); subsequent nursing facility care (HCPCS codes 99307 through 99310); nursing facility discharge services (HCPCS codes 99315 and 99316); and other nursing facility services (as described by HCPCS code 99318).

A pdf file of the final rule is available at:

 $\frac{http://www.cms.hhs.gov/apps/ama/license.asp?file=/physicianfeesched/downloads/CMS-1403-FC.pdf}{1403-FC.pdf}$

"CMS announced it will start reimbursing approved telehealth services for skilled nursing facilities starting in 2009"

CmReporter:

Community Services Programs (CSP) has been working with Cost Management Associates, Inc. (CMA Technologies) in Burlington, North Carolina to develop a web-based reporting system for the Community Services Block Grant (CSBG) Program. The Wyoming FY 09 CSBG Program contracts with 22 eligible entities which consist of Tripartite Boards and Community Action Agency Boards. These boards subcontract with over 150 local service providers. Each of these local service providers are required to submit monthly financial and performance reports to the eligible entities. The eligible entities then compile all of the reports and forward them to CSP. CSP must track and monitor these reports monthly. To simplify the process, CMA Technologies implemented this database which eases the monthly reporting process for the contractors as well as CSP.

Community Services Programs - "What we do"

- Distribute over \$3 million annually in federal Community Service Block Grant (CSBG) funding to 150 local non-profit service providers which afford basic and emergency services to move low-income families toward self sufficiency.
- Distribute nearly \$200,000 annually in federal Emergency Shelter Grant (ESG) funds to provide emergency shelter and supportive services for 2,500 homeless or at-riskfor-homelessness individuals in Wyoming.
- Distribute approximately \$750,000 annually in state funds to reimburse medical, insurance, and transportation costs for 120 low-income applicants diagnosed with renal disease, through coordination with nine local and two out-of-state dialysis centers.
- Provide education and awareness regarding organ donation via donations received from vehicle registrations.

Press Release of Senator Johnson:

Washington, DC—U.S. Senator Tim Johnson (D-SD) has asked President-Elect Barack Obama to fully fund Indian Country programs enacted as part of the President's Emergency Plan for AIDS Relief (PEPFAR) reauthorization bill, which passed Congress earlier this year. Johnson cosponsored an amendment to PEPFAR that directed money back home to fund health care, water projects and law enforcement programs on reservations.

The amendment supplemented the Indian Health Service and created an "Emergency Fund for Indian Safety and Health" within the Treasury Department. The amendment called for \$1 billion for water projects, \$750 million for safety and justice programs, and \$250 million to address health care needs in Indian Country.

"The Senate came together months ago to increase the amount of available funding for the most critical needs currently facing Indian Country," Johnson said. "I hope the new administration shows a renewed sense of purpose in addressing the needs of our tribes and provides these resources as part of the budget request for the upcoming year. I understand the President-Elect has a lot on his plate, but it is important this does not get lost in the shuffle."

"Amendment request to direct money to fund healthcare, water projects, and law enforcement on reservations"

Recent News from Rural Assistance Center:

Nation Faces Daunting Doctor Shortage

Dec 3, 2008 -- MedPage Today, (NJ) article reports that under any set of plausible assumptions, an immense shortage of physicians is impending, according to the Association of American Medical Colleges, and the shortage is expected to exceed 124,000 physicians by 2025, being most acute in primary care.

Pharmacists in Demand Across U.S.

Dec 1, 2008 -- Columbus Dispatch, (OH) article reports that pharmacists are in short supply across the country, particularly in rural areas, and competition among retail outlets and health-care facilities is fierce, and the pay -- salaries typically start around \$120,000 -- is high.

There's Value in Small-town Doctoring

Nov 28, 2008 -- Post Bulletin, (MN) article tells how the drawbacks of a rural practice are more than offset by the pluses of small-town life.

CMS Issues New FAQs on Medicare Recovery Audit Contractor Program

Nov 26, 2008 -- On November 25, 2008, the Centers for Medicare & Medicaid Services (CMS) posted new Frequently Asked Questions (FAQs) pertaining to the Medicare Recovery Audit Contractor (RAC) Program, including FAQs involving critical access hospitals and physician evaluation and management (E&M) services.

<u>Medicare Advantage Plans Muddy the Water, Do Not Improve Care but Cost More, New Studies Find</u>

Nov 25, 2008 -- Senior Journal article tells of a series of three reports in *Health Affairs* that found that the extra cost of the Medicare Advantage plans have provided senior citizens more alternative ways to receive Medicare benefits, but they have also created more complexity, while generating negligible gains in quality.

America's Best Leaders: Regina Benjamin, Small-Town Primary Care Physician

Nov 21, 2008 -- U.S. News and World Report tells how new doctors are shunning primary care, while seasoned physicians are giving up, but not Regina Benjamin of rural La Batre, Alabama.

Legislation to Support Health Care Workforce

Nov 21, 2008 -- Hudson Valley Press, (NY) article tells how Senator Hillary Rodham Clinton has introduced legislation that would increase investment in the training and education of health care professionals.

Funding Opportunities:

2009 Supporting the Safety Net

Application deadline: Applications accepted on an ongoing basis.

Funding to support programs that improve access to quality breast diagnostics and access to breast health care for the medically underserved.

Josiah Macy, Jr. Foundation Grants

Application deadline: Applications accepted on an ongoing basis.

Supports domestic health professional education.

"Physician shortage impending; shortage expected to exceed 124,000 by 2025, being most acute in primary care"

Rural & Frontier Health Division Update Page 6 of 6

Healthy Kids, Healthy Communities

Application deadline: Feb 3, 2009

This funding program places special emphasis on reaching children who are at highest risk for obesity on the basis of race/ethnicity, income and/or geographic location.

Rapid Response to Requests for Data Analysis

Application deadline: Feb 4, 2009

Funds to respond rapidly to requests for rural data analysis and conduct issue-specific rural research studies.

Rural Access to Emergency Devices Grant Program (RAED)

Application deadline: Feb 4, 2009

Grants for the purchase, placement and training in the use of automated external defibrillators (AEDs) in rural areas.

Health Careers Foundation Scholarships and Loans

Application deadline: Apr 1, 2009

Strives to alleviate shortages of trained healthcare professionals.

Ronald McDonald House Charities Grant Program

Letter of Intent (Required): Jan 16, 2009

Application deadline: Dec 1, 2009

Grants to organizations that help children read, provide nutritious after-school meals, offer life-changing surgeries, or help prevent life-threatening disease.

Upcoming Events:

- Bridges Out of Poverty, Jan. 7, 2009, Cheyenne, WY
- Applying Bridges Concept, Jan. 8, 2009, Cheyenne, WY
- The 2009 Community Action Partnership Management & Leadership Training Conference, Jan. 7-9, 2009, New Orleans, LA
- NRHA Rural Health Policy Institute, January 26-28, Washington, D.C.
- 2009 National Association for State Community Services Programs Mid-Winter Conference, Feb. 2-6, 2009, Washington, D.C.

We're on the Web!

See us at:

www.health.wyo.gov/rfhd